

**MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK**  
**SUBJECTWISE ELIGIBLE EXAMINERS LIST (PG Courses)**

Name of the College : N.K.P. Salve Institute of Medical Sciences & Research Centre and Lata Mangeshkar Hospital, Nagpur  
 Phone/Mobile No. : 07104-665000  
 Name of the Subject : Anatomy

as on 2/2023

Sr. No.	Name of Teacher (Last Name First Name Middle Name)	Designation	Subject/ Speciality	Type of Appointment (Regular/ Temp. / Honorary)	Qualification	University Approval (UG)	PG Teaching Experience (in Years) after PGM	PG Teacher Recognition Yes/No	(Recognition Letter Date issued by University)	No. of PG Students Guided last 5 year	Date of Birth	E-mail ID	Mobile No.	Aadhar Card No	if Debarred (Yes/ No)	Sign. of Teacher
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17
1	Dr. (Mrs.) Onkar Deepali Prashant	Professor & HOD	Anatomy	Regular	MBBS,MS	Yes	17 Yrs	Yes	21/12/2006	-	30-May-73	drdeepalionkar@yahoo.com	9822248570	7094 7976 4732	No	<i>Dr. Onkar</i>
2	Dr. Dehankar Rajesh Nagorao	Professor	Anatomy	Regular	MBBS,MS	Yes	11 Yrs	Yes	22/10/2011	-	11-Apr-73	rajeshdehankar1973@gmail.com	95521 76486	6724 2335 9705	No	<i>RJ</i>
3	Dr. Tabhane Manjusha Kesharao	Associate Professor	Anatomy	Regular	MBBS,MS	Yes	14 Yrs	Yes	16/9/2008	-	19-Jul-71	manjusha.matey@gmail.com	9422255177	5352 0558 6304	No	<i>MTabhane</i>
4	Dr. Walulkar Sanjay Mahadeorao	Associate Professor	Anatomy	Regular	MBBS,MS	Yes	11 Yrs	Yes	22/10/2011	-	23-Sep-73	sanjaymwalulkar@gmail.com	9822708712	2362 5493 4685	No	<i>Sanjay</i>
5	Dr. Fulse Anant Chintaman	Associate Professor	Anatomy	Regular	MBBS,MD	Yes	3 Yrs	Yes	18/10/2020	-	08-Feb-75	anantfulse@gmail.com	94218 14932	7504 3897 9655	No	<i>AF</i>

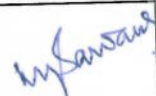

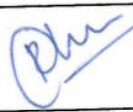


**DEAN**  
**N.K.P. Salve Institute**  
**Of Med. Sciences & RC**  
**and LMH, NAGPUR**

*Dr. Onkar*  
**DR. ONKAR ONKAR**  
**PROFESSOR & HOD**  
 Department of Anatomy  
 N.K.P. Salve Institute of Medical Sciences & Research Centre and Lata Mangeshkar Hospital, Nagpur

**MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK**  
**SUBJECTWISE ELIGIBLE EXAMINERS LIST (PG Courses)**

Name of the College: N.K.P. Salve Institute of Medical Sciences & Research Centre and Lata Mangeshkar Hospital, Nagpur  
 Phone/Mobile No. 07104-665000  
 Name of the Subject : Physiology

Sr. No.	Name of Teacher (Last Name First Name Middle Name)	Designation	Subject/ Speciality	Type of Appointment (Regular/ Temp. / Honorary)	Qualification	University Approx at (UG)	PG Teaching Experience (in Years) after PGM	PG Teacher Recognition Yes/No	(Recognition Letter Date issued by University)	No. of PG Students Guided last 5 year	Date of Birth	E-mail ID	Mobile No.	Aadhar Card No	If Debarred (Yes/ No)	Sign. of Teacher
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17
1	Dr. Manish V. Sawane	Prof. & HOD	Physiology	Regular	MBBS / MD Physiology	MUHS/E-1/UG/1503/1989/2020 Dtd. 28/10/2020	29 yrs 2 mths	Yes	MUHS/PG/E-1/1503/2462/11 Date-22/10/2011	Nil	10-Oct-69	manishsawane@yahoo.co.in	9822362835	719315270672	No	
2	Dr. Anjali Amit Date	Asso. Prof.	Physiology	Regular	MBBS / MD Physiology	MUHS/UG/E-1/057293/2429/2011 Dt. 05/07/2011	24 yrs. 7 mths	Yes	MUHS/PG/E-1/1503/309/2009 Date-02/03/2009	Nil	16/06/1974	date.anjali63@gmail.com	9970034944	503982233428	No	
3	Dr. Rakhee Ambade (Tirpude)	Asso. Prof.	Physiology	Regular	MBBS / MD Physiology	MUHS/UG/E-1/1503/4314/2014 dt 20/09/2014	19 yrs	Yes	MUHS/PG/E-1/1503/270/360/2015 Date-3/2/2015	Nil	18/08/1978	rakhee_t@rediffmail.com	9823090322	510615148699	No	

  
 Sign. Seal by HOD




**PROFESSOR & HOD**  
 Department of Physiology  
 N.K.P. Salve Institute of Medical  
 Sciences & Research Centre and  
 Lata Mangeshkar Hospital, Nagpur

  
 Sign. Seal by Dean

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**MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK**  
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Name of the College : N.K.P. Salve Institute of Medical Sciences & Research Centre and Lata Mangeshkar Hospital, Nagpur  
 Phone/Mobile No. : 07104-665000  
 Name of the Subject : Biochemistry

Sr. No.	Name of Teacher (Last Name First Name Middle Name)	Designation	Subject/ Speciality	Type of Appointment (Regular/ Temp. / Honorary)	Qualification	University Approval (UG)	PG Teaching Experience (in Years) after PGM	PG Teacher Recognition Yes/No	(Recognition Letter Date issued by University)	No. of PG Students Guided last 5 year	Date of Birth	E-mail ID	Mobile No.	Aadhar Card No	If Debarred (Yes/ No)	Sign. of Teacher
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17
1	Dr. Madhur Gupta	Prof. & HOD	Biochemistry	Regular	MBBS, MD (Bio.) DNB	No. MUHS/UG/E-1/057293/2429/2011 Dtd. 05/07/2011	13 Yrs. 06 Month	Yes	No. MUHS/ PG/ E-1/ 1503/ 1082/ 2009 Dtd. 16/07/2009	Nil	20 Dec. 1972 (50)	drmadhur20@rediffmail.com	9422782291	5065 8686 7606	No	
2	Dr. Smita Pakhmode (Narad)	Associate Professor	Biochemistry	Regular	MBBS, MD (Bio.)	No. MUHS/UG/E-1/1503/4905/2014 Dtd. 12/11/2014	7 Yrs. 09 Month	Yes	No. MUHS/ PG /E-1/ 1503/ 27/ 1048/ 2015 Dtd. 28/04/2015	Nil	23 Jan. 1977 (46)	smitapakhmode23@gmail.com	9423682499	9042 3580 5228	No	
3	Dr. Uppu Satya Devi	Associate Professor	Biochemistry	Regular	MBBS, MD (Bio.)	No. MUHS/UG/E-1/1503/4314/2014 Dtd. 20/09/2014	2 Yrs. 03 Month	Yes	No. MUHS/ PG /E-1/ 1503/ 1992/ 20 Dtd. 28/10/2020	Nil	03 Mar. 1971 (51)	satyanandikesh@yahoo.co.in	9422315824	6244 2172 0873	No	



**DEAN**  
**N.K.P. Salve Institute**  
**Of Med. Sciences & R**  
**and L. MH. NAGPUR**



Sing Seal by HOD

**DR. MADHUR GUPTA**  
**PROFESSOR & HOD**  
**Department of Biochemistry**  
**N.K.P. Salve Institute of Medical**  
**Sciences & Research Centre and**

Sing Seal by Dean

**MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK**  
**SUBJECTWISE ELIGIBLE EXAMINERS LIST (PG Courses)**

Name of the College : N.K.P. Salve Institute of Medical Sciences & Research Centre and Lata Mangeshkar Hospital, Nagpur  
Phone/Mobile No. : 07104-665000  
Name of the Subject : Pathology

As On-Jan2023

Sr. No.	Name of Teacher (Last Name First Name Middle Name)	Designation	Subject/ Speciality	Type of Appointment (Regular/ Temp. / Honorary)	Qualification	University Approval (UG)	PG Teaching Experience (in Years) after PGM	PG Teacher Recognition Yes/No	(Recognition Letter Date issued by University)	No. of PG Students Guided last 5 year	Date of Birth	E-mail ID	Mobile No.	Aadhar Card No	If Debarred (Yes/ No)	Sign. of Teacher
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17
1	Dr.(Mrs.) S.A.Maimoon	Professor & HOD	Pathology	Regular	MBBS,MD Pathology	Yes	16 yrs. 5 months	Yes	MUHS/E1/PG/1503/3553//2006 dt-04.08.2006	6	02-Oct-61	sabihamaimoon@hotmail.com	9823078042	540147228021	No	<i>S.A. Maimoon</i>
2	Dr.(Mrs.) S.D.Mahore	Professor	Pathology	Regular	MBBS,MD Pathology	Yes	16 yrs. 5 months	Yes	MUHS/E1/PG/1503/3553//2006 dt-04.08.2006	7	16-Jan-64	devenmahore@gmail.com	9823225952	762648591064	No	<i>S.D. Mahore</i>
3	Dr.(Mrs.) K.A.Bothale	Associate Professor	Pathology	Regular	MBBS,MD Pathology	Yes	16 yrs. 5 months	Yes	MUHS/E1/PG/1503/3553//2006 dt-04.08.2006	6	02-Oct-62	kalpana_bothale@yahoo.co.in	9422805819	377194067490	No	<i>K.A. Bothale</i>
4	Dr.(Mrs.) A.M. Joshi	Associate Professor	Pathology	Regular	MBBS,MD Pathology	Yes	16 yrs. 5 months	Yes	MUHS/E1/PG/1503/3553//2006 dt-04.08.2006	6	27-Jan-66	drarchanajoshi2701@yahoo.com	9373101153	533041623658	No	<i>A.M. Joshi</i>
5	Dr.(Mrs.) A.R. Wilkinson	Associate Professor	Pathology	Regular	MBBS,MD Pathology	Yes	16 yrs. 5 months	Yes	MUHS/E1/PG/1503/3553//2006 dt-04.08.2006	5	10-Dec-62	anne_cerry@yahoo.co.in	9823269369	614880137654	No	<i>A.R. Wilkinson</i>
6	Dr.(Mrs.) A.D.Patrikar	Associate Professor	Pathology	Regular	MBBS,MD Pathology	Yes	16 yrs. 5 months	Yes	MUHS/E1/PG/1503/3553//2006 dt-04.08.2006	3	25-May-66	anjali.patrikar@yahoo.in	9823085809	875476904975	No	<i>A.D. Patrikar</i>
7	Dr.(Mrs.) P.J. Karmarkar	Associate Professor	Pathology	Regular	MBBS,MD Pathology	Yes	16 yrs. 5 months	Yes	MUHS/E1/PG/1503/3553//2006 dt-04.08.2006	3	25-Jul-65	pragatikarmarkar25@gmail.com	9823291726	493352266793	No	<i>P.J. Karmarkar</i>
8	Dr. Trupti Dongre	Assistant Professor	Pathology	Regular	MBBS,MD Pathology	Yes	-	Yes	MUHS/PG/E1/1503/27/163/2023 dt-13.01.2023	-	21-May-81	dr.truptidongre@yahoo.co.in	9823317882	622636686091	No	<i>Trupti Dongre</i>

*S.A. Maimoon*  
**PROFESSOR & HOD**  
**Department of Pathology**  
N.K.P. Salve Institute of Medical Sciences & Research Centre and Lata Mangeshkar Hospital, Nagpur  
Sing Seal by HOD

*(Signature)*  
**DEAN**  
**N.K.P. Salve Institute**  
**Of Med. Sciences & Research Centre**  
**and L.M.H. NAGPUR**

**MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK**  
**SUBJECTWISE ELIGIBLE EXAMINERS LIST (PG Courses)**

Name of the College N.K.P. Salve Institute of Medical Sciences & Research Centre and Lata Mangeshkar Hospital, Nagpur

Phone/Mobile No. : 07104-665000

Name of the Subject : Pharmacology

Sr. No.	Name of Teacher (Last Name First Name Middle Name)	Designation	Subject/Speciality	Type of Appointment (Regular/Temp./Honorary)	Qualification	University Approval (UG)	PG Teaching Experience (in Years) after PGM	PG Teacher Recognition Yes/No	(Recognition Letter Date issued by University)	No. of PG Students Guided last 5 year	Date of Birth	E-mail ID	Mobile No.	Aadhar Card No	If Debarred (Yes/No)	Sign. of Teacher
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17
1	Dr. Riyaz A Siddiqui	Prof. & HOD	Pharmacology	Regular	MBBS MD	MUHS(UG)/E/1/1503/5634/2022, dated 22/12/2022	19yrs.5mths	Yes	MUHS/PG/E-1/1503/1992/20, 28/10/2020		20-08-1975	riyaz19752008@gmail.com	9326724322	256888536988	No	<i>[Signature]</i>
2	Dr. Amit P. Date	Asso. Prof.	Pharmacology	Regular	MBBS MD	MUHS/UG/E-1/057293/2429/2011	21yrs 3ths	Yes	MUHS/PG/E-1/1503/2462/2011		13-01-1973	amit_date9173@yahoo.co.in	9850657445	956720843531	No	<i>[Signature]</i>
3	Dr. Tanaji R. Shende	Asso. Prof.	Pharmacology	Regular	MBBS MD	MUHS/UG/E-1/1503/1183/2015,	16 yrs	Yes	MUHS/PG/E-1/1503/27/2221/15,d		18-06-1956	tanaji_shende@rediffmail.com	9764574148	614072109788	No	<i>[Signature]</i>
4	Dr. (Mrs) A.V. Dashputra	Asso. Prof.	Pharmacology	Regular	MBBS MD	MUHS(UG)/E/1/1503/5634/2022, dated 22/12/2022	14 yrs 8 mnths	Yes	MUHS/PG/E-1/1503/271/1048/15, dated 28/04/2015,w.e.f 12/01/2015 onwards		11-11-1964	avdashputra@gmail.com	9822738923	903050015002	No	<i>[Signature]</i>

*[Signature]*

DEAN  
 N.K.P. Salve Institute  
 Of Med. Sciences & RC  
 and LMH, NAGPUR

*[Signature]*

DR. R.A. SIDDIQUI  
 PROFESSOR & HOD  
 Department of Pharmacology  
 N.K.P. Salve Institute of Medical  
 Sciences & Research Centre and  
 Lata Mangeshkar Hospital, Nagpur

Sing Seal by HOD






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1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17
1	Dr. Neena V. Nagdeo	Prof. & Head	Microbiology	Regular	MBBS , MD {Microbiology}	Yes	20 Years	Yes	Nahpur Univ. /11665/2002 Dt. 22.08.2002 No. MUHS/PG/E-1/1503/2266/11 Dt. 08.10.2011	NIL	28.10.1965	neenagdeo@gmail.com	9422113603	212457924164	No	
2	Dr. Vilas R. Thombare	Professor	Microbiology	Regular	MBBS , MD {Microbiology}	Yes	20 Years	Yes	Nahpur Univ. /11665/2002 Dt. 22.08.2002 No. MUHS/PG/E-1/1503/2266/11 Dt. 08.10.2011	NIL	17.12.1960	drvthombare@rediffmail.com	9850401857	805375800413	No	
3	Dr. Neelam K. Jaitly	Professor	Microbiology	Regular	MBBS , MD {Microbiology}	Yes	20 Years	Yes	Nahpur Univ. /11665/2002 Dt. 22.08.2002 No. MUHS/PG/E-1/1503/2266/11 Dt. 08.10.2011	NIL	07.03.1966	neelam.jaitlyni2014@gmail.com	9823443698	652866069154	No	
4	Dr. Kalpana P. Date	Associate Professor	Microbiology	Regular	MBBS , MD {Microbiology}	Yes	20 Years	Yes	Nahpur Univ. /11665/2002 Dt. 22.08.2002 No. MUHS/PG/E-1/1503/2266/11 Dt. 08.10.2011	NIL	01.02.1967	datekalpana@gmail.com	9422808066	867984595297	No	
5	Dr. Umesh S. Hassani	Associate Professor	Microbiology	Regular	MBBS , MD {Microbiology}	Yes	16 03 M	Yes	MUHS/PG/E-1/1503/1992/20 Dt. 28.10.2020	NIL	13.05.1972	drumeshhassani@gmail.com	9890130907	605259850925	No	

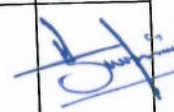
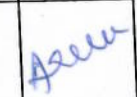
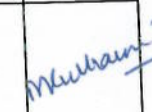
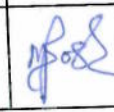
  
**DR. NEENA V. NAGDEO**  
**PROFESSOR & HOD**  
**Department of Microbiology**  
**N.K.P. Salve Institute of Medical**  
**Sciences & Research Centre and**  
**Lata Mangeshkar Hospital, Nagpur**

  
**DEAN**  
**N.K.P. Salve Institute**  
**Of Med. Sciences & R**  
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**MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK**  
**SUBJECTWISE ELIGIBLE EXAMINERS LIST (PG Courses)**

Name of the Cc N.K.P. Salve Institute of Medical Sciences & Research Centre and Lata Mangeshkar Hospital, Nagpur  
 Phone/Mobile | 07104-665000

Name of the Su Community Medicine

Sr. No.	Name of Teacher (Last Name First Name Middle Name)	Designation	Subject/ Speciality	Type of Appointment (Regular/ Temp. / Honorary)	Qualification	University Approx at (UG)	PG Teaching Experience (in Years) after PGM	PG Teacher Recognition Yes/No	(Recognition Letter Date issued by University)	No. of PG Students Guided last 5 year	Date of Birth	E-mail ID	Mobile No.	Aadhar Card No	if Debarred (Yes/ No)	Sign. of Teacher
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17
1	Dr. Saoji Ajeet Vasant	Professor & Hod	Community Medicine	Regular	MBBS, MD, DPH	Professor: MUHS/UG/E-1/53/1503/3305/2018, DT 7/9/2018	15 Year 5 Month	Yes	MUHS/E-1/PG/1503/186/07, DT. 21/8/2007	3	2/6/1970	ajeet.saoji@rediffmail.com	98227 15183	549868418978	NO	
2	Dr. Deoke Aniruddha Ramdaspanth	Professor	Community Medicine	Regular	MBBS, MD,	Asso. Prof.: MUHS/UG/E-1/1503/4314/2014 dated 20/09/2014	15 Year 3 Month	Yes	Yes. MUHS/E-1/PG/1503/366/07, DT 16/10/2007	2	8/1/1967	draniruddha.deoke@yahoo.co.in	95455 44666 & 94221 55266	621877735090	NO	
3	Dr. Kulkarni Meenal Vinay	Associate Professor	Community Medicine	Regular	MBBS, MD,	MUHS/ UG/E-1/1503/5634/2022 Dated -22/12/2022	11 Year 3 Month	Yes	MUHS/E -1/PG/E-1/057293/2429/2011 Dated 31/10/2011 MUHS /PG/E-1/1503/27/2007/15 Dated -2/5/2015	1	16/2/1976	meenalkulkarni76@gmail.com	99229 49668	703224842592	NO	
4	Dr. Joshi Mohan Pandurang	Associate Professor	Community Medicine	Regular	MBBS, MD,	MUHS//E-/UG/1503/4905/2014, Dated 12/11/2014	14 Year 4 Month	Yes	Yes. MUHS/E-1/1503/1149/08/ Dated 16/9/2008	1	9/7/1960	mjoshi1960@gmail.com	98229 43379	219065017728	NO	

Signature of HOD with Seal

**PROFESSOR & HOD**

Department of Community Medicine  
 N.K.P. Salve Institute of Medical  
 Sciences & Research Centre and Lata  
 Mangeshkar Hospital, Nagpur

Signature of Dean with Seal



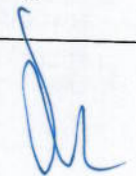



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**MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK**  
**SUBJECTWISE ELIGIBLE EXAMINERS LIST (PG Courses)**

Name of the College : N.K.P. Salve Institute of Medical Sciences & Research Centre and Lata Mangeshkar Hospital, Nagpur

Phone/Mobile No. : 07104-665000

Name of the Subject : General Medicine

Sr. No.	Name of Teacher (Last Name First Name Middle Name)	Designation	Subject/ Speciality	Type of Appointment (Regular/ Temp. / Honorary)	Qualification	University Approval at (UG)	PG Teaching Experience (in Years) after PGM	PG Teacher Recognition Yes/No	(Recognition Letter Date issued by University)	No. of PG Students Guided last 5 year	Date of Birth	E-mail ID	Mobile No.	Aadhar Card No	If Debarred (Yes/ No)	Sign.. of Teacher
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1	Dr.Tanuja Pravin Manohar	Professor & HOD	General Medicine	Regular	MBBS, MD	UG Approval	28 Year	Yes	No. MUHS/E-1/PG/1503/3553/2006 dated 4/8/2006	10	19.01.1965 58 Years	tanuja.manohar9@gmail.com	9822706335	551740817998	No	
2	Dr.Nalini Rajesh Humaney	Professor	General Medicine	Regular	MBBS, MD	UG Approval	31.5 years	Yes	No. MUHS/E-1/PG/1503/3553/2006 dated 4/8/2006	13	31.03.1962 60 Years	nhumaney@gmail.com	9657874811	628416157460	No	
3	Dr. Ramesh P. Mundle	Professor	General Medicine	Temp	MBBS, MD	UG Approval	40.8 Years	Yes	No.MUHS/PG/E-1/1503/27/1662/2022 dated 20.06.2022	5	16.03.1955 67 Years	rpmundle@gmail.com	9822232269	959518067266	No	
4	Dr.Yogendra Vithobaji Bansod	Professor	General Medicine	Temp	MBBS, MD	UG Approval	37.6 Years	Yes	No.MUHS/PG/E-1/1503/27/1662/2022 dated 20.06.2022	1	27.8.1955 67 Years	yogendrabansod@gmail.com	9890957604	699808990601	No	
5	Dr.Shilpa Anirudha Deoke	Professor	General Medicine	Regular	MBBS, MD	UG Approval	18.8 Years	Yes	MUHS/E-1/PG/1503/623/08 dated 27.05.2008	11	08.08.1972 50 Years	drshilpadeoke2020@gmail.com	9422955094	827868872654	No	
6	Dr.Neelima Rajendra Saoji	Asso. Professor	General Medicine	Regular	MBBS, MD	UG Approval	29.4 Years	Yes	No. MUHS/E-1/PG/1503/3553/2006 dated 4/8/2006	9	08.01.1963 59 Years	neelimasaoji@yahoo.in	9823274711	750950798082	No	

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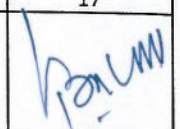

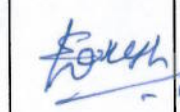
7	Vivek Krishnakant Pande	Asso. Professor	General Medicine	Temp	MBBS, MD	UG Approval	17.4 Years	Yes	No. MUHS/PG/E-1/1503/27/40 92/22 dated 16/11/2022	6	10.01.1958 64 Years	vpande35@gmail.com	9890932332	518934102729	No	
8	Dr. Sunanda Ashutosh Chaoji	Asso. Professor	General Medicine	Temp	MBBS, MD	UG Approval	11.4 Years	Yes	No. MUHS/PG/E-1/1503/27/33 98/2022 dated 20/9/2022	3	20.06.1956 66 Years	sunandachaoji1956@gmail.com	9922965406	22672305812	No	
9	Dr. Shilpa Sachin Kuthe	Asso. Professor	General Medicine	Regular	MBBS, MD	UG Approval	7.4 Years	Yes	No. MUHS/PG/E-1/1503/1348/20 dated 05/08/2020	6	04.01.1981 42 years	shilpaskuthe11@gmail.com	7722006412	640393467173	No	
10	Dr. Madhuri Prashant Holay	Asso. Professor	General Medicine	Regular	MBBS, MD	UG Approval	38.4 Years	Yes		-	02.01.1958 65 Years	mpholay@gmail.com	9766541270	264914809504	No	

DEAN  
N.K.P. Salve Institute  
Of Med. Sciences & Research  
and LMH, NAGPUR

PROFESSOR & HOD  
Department of General Medicine  
N.K.P. Salve Institute of Medical  
Sciences & Research Centre and  
Jyoti Mangeshkar Hospital Nagpur

**MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK**  
**SUBJECTWISE ELIGIBLE EXAMINERS LIST (PG Courses) As on Jan-2023**


Name of the College : N.K.P. Salve Institute of Medical Sciences & Research Centre and Lata Mangeshkar Hospital, Nagpur  
 Phone/Mobile No. : 07104-665000  
 Name of the Subject : Dermatology Venerology and Leprosy

Sr. No.	Name of Teacher (Last Name First Name Middle Name)	Designation	Subject/Speciality	Type of Appointment (Regular/Temp./Honorary)	Qualification	University Approx at (UG)	PG Teaching Experience (in Years) after PGM	PG Teacher Recognition Yes/No	(Recognition Letter Date issued by University)	No. of PG Students Guided last 5 year	Date of Birth	E-mail ID	Mobile No.	Aadhar Card No	If Debarred (Yes/ No)	Sign. of Teacher
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17
1	Dr.Milind Ambadas Borkar	Prof. & HOD	Dermatology	Regular	M.B.B.S. MD, D.N.B.	28 yrs 3 months	26 yrs 3 months	Yes	No.MUHS/PG /1503/3553/2006. Dtd. 04/08/2006	12	7/16/1968	drmilindborkar@rediffmail.com	9422108764	9809 4363 8854	No	
2	Dr.Sushil Yaswant Pande	Professor	Dermatology	Regular	M.B.B.S. MD	15 yrs 2 months	16 yrs 8 months	Yes	No.MUHS/PG /E- 1/1503/27/13 11/16/2014 dated 23/05/2016	6	5/16/1976	drsushilpande@gmail.com	9323511245	6115 7026 9682	No	
3	Dr.Lokesh Siddhanan Jappa	Associate Professor	Dermatology	Temp.	M.B.B.S. MD	16 yrs 2 months	18 yrs 2 months	Yes	No.MUHS/PG /E- 1/1503/439/2019 dated 25/01/2019	0	11/18/1971	drlokeshsid@gmail.com	9422104617	2592 5853 3933	No	

  
**PROFESSOR & HOD**

Department of Dermatology, Venerology and Leprosy  
 N.K.P. Salve Institute of Medical  
 Sciences & Research Centre and  
 Lata Mangeshkar Hospital Nagpur

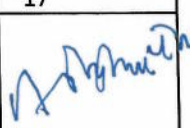



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**DEAN**  
 N.K.P. Salve Institute  
 Of Med. Sciences & RC  
 and L.M.H. NAGPUR

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**MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, PUNE**  
**SUBJECTWISE ELIGIBLE EXAMINERS LIST (PG Courses)**

Name of the College : N.K.P. Salve Institute of Medical Sciences & Research Centre and Lata Mangeshkar Hospital, Nagpur  
 Phone/Mobile No. : 07104-665000  
 Name of the Subject : MD Psychiatry

Sr. No.	Name of Teacher (Last Name First Name Middle Name)	Designation	Subject/Speciality	Type of Appointment (Regular/Temp./Honorary)	Qualification	University Approval (UG)	PG Teaching Experience (in Years) after PGM	PG Teacher Recognition Yes/No	(Recognition Letter Date issued by University)	No. of PG Students Guided last 5 year	Date of Birth	E-mail ID	Mobile No.	Aadhar Card No	If Debarred (Yes/No)	Sign. of Teacher
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17
1	Kirpekar Vivek Chintaman	Professor	Psychiatry	Reguler	MBBS MD	MUHS	13yrs 5Mnths	Yes	No.MUHS/E1/PG/1503/2266/11 dt. 8.10.2011	7	13-Feb-61	vivekanu@rediffmail.com	9822200689	6709 4686 3823	No	
2	Bhave Sudhir Harishchandra	Professor	Psychiatry	Reguler	MBBS MD	MUHS	13yrs 5Mnths	Yes	No.MUHS/E1/1503/1604/08, dt. 2/12/03	5	04-Dec-58	shbhav@gmail.com	9822695890	7430 0583 7602	No	
3	Gawande Sushil Dadaji	Professor	Psychiatry	Reguler	MBBS MD	MUHS	14yrs 2mnths	Yes	No.MUHS/E1/1503/1348/20 dt. 5/08/20	3	09-Mar-78	sushil.gawande@rediffmail.com	9322013915	6691 3765 5033	No	
4	Tadke Rahul Ramdas	Asso. Professor	Psychiatry	Reguler	MBBS MD	MUHS	13yrs 5Mnths	Yes	No.MUHS/E1/1503/27/2940/13 dt. 17/10/13	5	16-May-75	rahultadke@vsnl.net	9823027370	9673 0935 4849	No	
5																

  
**PROFESSOR & HOD**  
 Department of Psychiatry  
 N.K.P. Salve Institute of Medical  
 Sciences & Research Centre and  
 Lata Mangeshkar Hospital, Nagpur

Sing Seal by HOD

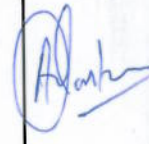
  
**DEAN**  
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**MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK**  
**SUBJECTWISE ELIGIBLE EXAMINERS LIST (PG Courses)**

Name of the Cc N.K.P. Salve Institute of Medical Sciences & Research Centre and Lata Mangeshkar Hospital, Nagpur  
 Phone/Mobile No 07104-665000

Name of the Subject : Respiratory Medicine

Sr. No.	Name of Teacher (Last Name First Name Middle Name)	Designation	Subject/ Speciality	Type of Appointment (Regular/ Temp. / Honorary)	Qualification	University Approval (UG)	PG Teaching Experience (in Years) after PGM	PG Teacher Recognition Yes/ No	(Recognition Letter Date issued by University)	No. of PG Students Guided last 5 year	Date of Birth	E-mail ID	Mobile No.	Aadhar Card No	If Debarred (Yes/ No)	Sign. of Teacher
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17
1	Dr. Sontakke Anil Kishanrao	Professor & HOD	Respiratory Medicine	Regular	MBBS - 2000 MD Chest & TB - 2006	1. No. MUHS/UG/E-1/1104/2538/2008 dt.25/08/2008 2.No.MUHS/UG/E-1/057379/3179/2012,dt.07/08/2012 3.No.MUHS/UG/E1/1503/4905/2014 dt. 12/11/2014 4.No.MUHS/UG/E-1/53/1503/4066/2018 , dt.15/11/2018 5. No.MUHS/ UG/E-1/53/1503/1018/2020 dt. 09/06/2020	10 years 8 mon	Yes	1. No. MUHS/PG/E-1 1503/74/13 dt.05/01/2013 2. No. MUHS/PG/E-1 1503/27/1048/2015 ,dt.28/04/2015 3.No.MUHS/PG/E-1/1503/2320/2019 ,dt 12/06/2019 4. No. MUHS/PG/E-1/1503/1348/2020, dt. 05/08/2020	14	15th June 1978	dranil777747@rediffmail.com	9869027857	6182 1178 1408	No	



**PROFESSOR & HOD**  
 Department of Respiratory Medicine  
 N.K.P. Salve Institute of Medical Sciences & Research Centre and Lata Mangeshkar Hospital, Nagpur

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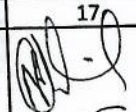
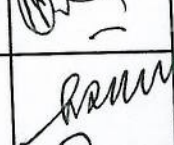
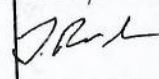
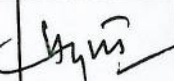
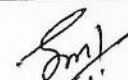
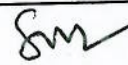



**DEAN**  
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**MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK**  
**SUBJECTWISE ELIGIBLE EXAMINERS LIST (PG Courses)**

Name of the College : N.K.P. Salve Institute of Medical Sciences & Research Centre and Lata Mangeshkar Hospital, Nagpur  
 Phone/Mobile No. : 07104-665000  
 Name of the Subject : General Surgery

Sr. No.	Name of Teacher (Last Name First Name Middle Name)	Designation	Subject/ Speciality	Type of Appointment (Regular/ Temp. / Honorary)	Qualification	University Approx at (UG)	PG Teaching Experience (in Years) after PGM	PG Teacher Recognition Yes/No	(Recognition Letter Date issued by University)	No. of PG Students Guided last 5 year	Date of Birth	E-mail ID	Mobile No.	Aadhar Card No	If Debarred (Yes/ No)	Sign.. of Teacher
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17
1	Dr. Nitin Wasnik	Professor & HOD	Gen. Surgery	Regular	M.S.	Yes	17 yrs.	Yes	MUHS/PG/E-1/1503/ 2266 /2011 Dt. 09.10.2011	9	24.09. 1963	nitinwasnik42@yahoo.co.in	98230 61714	6446 9149 4555	No	
2	Dr. S. D. Deshmukh	Professor	Gen. Surgery	Regular	M.S.	Yes	16 yrs.	Yes	MUHS/PG/E-1/53/1503/1418 /2020 Dt. 11/08/2020	8	05.12. 1957	drsatisdeshmukh90@yahoo.co.in	98230 54522	5389 2803 9087	No	
3	Dr. T.R.V. Wilkinson	Associate Professor	Gen. Surgery	Regular	M.S.	Yes	17 yrs.	Yes	MUHS/PG/E-1/1503/ 2266 /2011 Dt. 09.10.2011	9	18.04 1961	rajuwik@gmail.com	98230 88367	9510 5546 9651	No	
4	Dr. Mahendra Chauhan	Associate Professor	Gen. Surgery	Regular	M.S.	Yes	12 yrs.	Yes	MUHS/PG/E-1/53/1503/1418 /2020 Dt. 11/08/2020	7	27.04. 1977	drmahendrk@rediffmail.com	94229 04685	9360 5915 7782	No	
5	Dr. Sushrut Fulare	Associate Professor	Gen. Surgery	Regular	M.S.	Yes	14 yrs.	Yes	MUHS/PG/E-1/53/1503/1418 /2020 Dt. 11/08/2020	7	16.06. 1976	drsmfulare@gmail.com	94039 30357	8321 5693 2937	No	
6	Dr. S. E. Chaudhary	Associate Professor	Gen. Surgery	Regular	M.S.	Yes	11 yrs	Yes	MUHS/PG/E-1/1503/350/12 Dt. 01.02.2012	6	08.09. 1961	drswanandchaudhary_80961@yahoo.co.in	98230 14061	7713 4359 2357	No	
7	Dr. Mohd. Yunus Shah	Associate Professor	Gen. Surgery	Regular	M.S.	Yes	10 yrs	Yes	MUHS/PG/E-1/1503/ 27/ 1048/15 Dt. 28.04.2015	0	14.03. 1976	shahyunus94@yahoo.com	98903 18105	2436 9564 6200	No	



**DEAN**  
**N.K.P. Salve Institute**  
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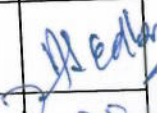


**Prof. & HOD**  
**Dept. of Gen. Surgery**

**MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK**  
**SUBJECTWISE ELIGIBLE EXAMINERS LIST (PG Courses)**

Name of the College N.K.P. Salve Institute of Medical Sciences & Research Centre and Lata Mangeshkar Hospital, Nagpur

Phone/Mobile No. : 07104-665000

Name of the Subject : Paediatrics

Sr. No.	Name of Teacher (Last Name First Name Middle Name)	Designation	Subject/ Speciality	Type of Appointment (Regular/ Temp. / Honorary)	Qualification	University Approval at (UG)	PG Teaching Experience (in Years) after PGM	PG Teacher Recognition Yes/No	(Recognition Letter Date issued by University)	No. of PG Students Guided last 5 year	Date of Birth	E-mail ID	Mobile No.	Aadhar Card No	If Debarred (Yes/ No)	Sign.. of Teacher
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17
1	Nanoti Girish Madhusudan	Professor & HOD	Paediatrics	Regular	M.B.B.S. M.D.	UG Approval	08 Year 07 Mths	YES	MUHS/PG/E1/1503/1348/2020, date 05/8/2020 No.MUHS/PG/E-1/1503/27/398/23, dt.01/02/2023	10	9-Feb-65	gir65suv@yahoo.co.in	9422492050	8023 6852 7248	No	
2	Edbor Anjali Jayjit	Professor	Paediatrics	Regular	M.B.B.S. M.D.	UG Approval	15 Years 07 Mths	YES	MUHS/PG/E1/1503/1348/2020, date 05/8/2020	11	3-Sep-64	dranjaliiedbor@gmail.com	9822470808	8039 2001 8399	No	
3	Pazare Pradeep Krishnrao	Associate Professor	Paediatrics	Regular	M.B.B.S. M.D.	UG Approval	07 Year 09 Mths	YES	MUHS/PG/E1/1503/1348/2020, date 05/8/2020	10	9-Aug-74	shilpadeep_160@Yahoo.co.in	7387091444	2710 2090 8794	No	
4	Dua Himanshu Jitender	Associate Professor	Paediatrics	Regular	M.B.B.S. D.N.B. D.C.H.	UG Approval	07 Year 09 Mths	YES	No.MUHS/PG/E1/1503/27/1048/15 ,dt 28/4/2015 No.MUHS/PG/E-1/1503/27/398/23, dt.01/02/2023	5	21-Jan-74	dr_himanshupae ds@yahoo.com	9371137666	9091 8781 1782	No	



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**and LMH, NAGPUR**



**Dr. Girish Nanoti**

Reg. No. 59114

Professor & HOD

Department of Paediatrics

N.K.P. Salve Institute of Medical

Sciences & Research Centre &


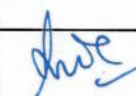
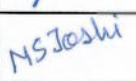
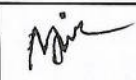

Lata Mangeshkar Hospital, Nagpur

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**MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK**  
**SUBJECTWISE ELIGIBLE EXAMINERS LIST (PG Courses)**

Name of the College : N.K.P. Salve Institute of Medical Sciences & Research Centre and Lata Mangeshkar Hospital, Nagpur  
 Phone/Mobile No. : 07104-665000  
 Name of the Subject : Orthopedics

Sr. No.	Name of Teacher (Last Name First Name Middle Name)	Designation	Subject/ Speciality	Type of Appointment (Regular/ Temp. / Honorary)	Qualification	University Approx at (UG)	PG Teaching Experience (in Years) after PGM	PG Teacher Recopnil ion Yes/No	(Recognition Letter Date issued by University)	No. of PG Students Guided last 5 year	Date of Birth	E-mail ID	Mobile No.	Aadhar Card No	if Debarred (Yes/ No)	Sign.. of Teacher
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17
1	Dr. Mankar Sushil Haridas	Professor & HOD	Orthopedics	Regular	MBBS, MS	Yes	29 Yrs. 08 mth.	Yes	MUHS/E-1/PG/1503/2266/2011 dt. 5/10/11	9	02.07.1963 59 yrs.	drshmankar@gmail.com	9422108284	6675 9156 7795	No	
2	Dr. . Barick Devashis R	Professor	Orthopedics	Regular	MBBS, MS, DNB	Yes	21 Years 03 Mths	Yes	MUHS/PG/E-1/1503/1348/2020 Dt. 5/8/20	6	08.09.1974 48 yrs.	devashisb@gmail.com	9822237840	8046 3148 8901	No	
3	Dr. Joshi Nilesh Sharad	Asso. Prof.	Orthopedics	Regular	MBBS, D(Ortho), DNB	Yes	15 Years 05 Mth.	Yes	MUHS/PG/E-1/1503/1348/2020 Dt. 5/8/20	3	14.11.1975 47 yrs.	drjnilesh@gmail.com	9823079227	2407 0887 8549	No	
4	Dr. Faizan Mohammed	Asso. Prof.	Orthopedics	Regular	MBBS, MS	Yes	13 Yrs. 08 Mth	Yes	MUH/SPG/E-1/1503/27/2488/2015 dt. 20/6/15	5	01.06.1980 42 yrs.	dmfaizan@yahoo.co.in	9323218434	2416 1864 3030	No	
5	Dr. Sapre Vikram Ramrao	Asso. Prof.	Orthopedics	Regular	MBBS, MS	Yes	12 Yrs. 01 Mth.	Yes	MUHS/PG/E-1/1503/27/2780/16 Dt. 25/10/2016	2	25.01.1976 46 yrs.	vikramsapre@gmail.com	9323961807	6670 2882 2008	No	



**DEAN**  
**N.K.P. Salve Institute**  
**Of Med. Sciences & RC**  
**and LMH, NAGPUR**



**DR. SUSHIL H. MANKAR**  
**PROFESSOR & HOD**  
**Department of Orthopedics**  
**N.K.P. Salve Institute of Medical**  
**Sciences & Research Centre and**  
**Lata Mangeshkar Hospital, Nagpur**

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**MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK**  
**SUBJECTWISE ELIGIBLE EXAMINERS LIST (PG Courses)**

Name of the College : N.K.P. Salve Institute of Medical Sciences & Research Centre and Lata Mangeshkar Hospital, Nagpur  
 Phone/Mobile No. : 07104-665000  
 Name of the Subject : Ophthalmology

Sr. No.	Name of Teacher (Last Name First Name Middle Name)	Designation	Subject/ Speciality	Type of Appointment (Regular/ Temp. / Honorary)	Qualification	University Approx at (UG)	PG Teaching Experience (in Years) after PGM	PG Teacher Recognition Yes/No	(Recognition Letter Date issued by University)	No. of PG Students Guided last 5 year	Date of Birth	E-mail ID	Mobile No.	Aadhar Card No	If Debarred (Yes/ No)	Sign.. of Teacher
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17
1	Dr. Rekha Rajkumar Khandelwal	Professor & HOD	Ophthalmology	Reg.	MBBS,MS, DNB,FICO, FRCS	Yes	28 Years	Yes	No. MUHS/PG-E-1/1503/1082/09. Date:-16/7/2009	11	07-Mar-65	rekha.khandelwal@gmail.com	9823261794	2133 5105 4977	No	<i>Rekha</i>
2	Dr.Dharmendra Arjun Kose	Associate Professor	Ophthalmology	Reg.	MBBS,MS	Yes	27 Yrs. 02 Mths	Yes	No. MUHS/E-1/PG/1503/3553/2006 Date:-04/08/2006	7	14-Apr-62	drkose_2007@rediffmail.com	9665098861	8673 9515 5506	No	<i>Dr. Kose</i>
3	Dr.Nikose Archana Sunil	Associate Professor	Ophthalmology	Reg.	MBBS,MS	Yes	20 Years 10 Months	Yes	No.MUHS/PG/E-1/1503/2972/2011 Date:-15/12/2011	4	21-May-67	archananikose@gmail.com	9422875865	6724 2335 9705	No	<i>on leave</i>

*Rekha*




DEAN  
 N.K.P. Salve Institute  
 Of Med. Sciences & RC  
 and L.M.H. NAGPUR

*Rekha*  
**Dr. Rekha Khandelwal**  
 PROFESSOR & HOD  
 Department of Ophthalmology  
 N.K.P. Salve Institute of Medical  
 Sciences & Research Centre and  
 Lata Mangeshkar Hospital, Nagpur



**MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK**  
**SUBJECTWISE ELIGIBLE EXAMINERS LIST (PG Courses)**

Name of the College : N.K.P. Salve Institute of Medical Sciences & Research Centre and Lata Mangeshkar Hospital, Nagpur  
 Phone/Mobile No. : 07104-665000  
 Name of the Subject : Otorhinolaryngology (ENT)

Sr. No.	Name of Teacher (Last Name First Name Middle Name)	Designation	Subject/Speciality	Type of Appointment (Regular/Temp./Honorary)	Qualification	University Approved at (UG)	PG Teaching Experience (in Years) after PGM	PG Teacher Recognition Yes/No	(Recognition Letter Date issued by University)	No. of PG Students Guided last 5 year	Date of Birth	E-mail ID	Mobile No.	Aadhar Card No	If Debarred (Yes/No)	Sign. of Teacher
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17
1	Dr. Vivek Vishwas Harkare	Professor & HOD	Otorhinolaryngology	Regular	M.B.B.S., M.S., DNB (ENT)	Yes	32 Years 5 Months	Yes	MUHS/PG/E-1/1503/2266/11 Dt. 08/10/2011	4	12-Mar-62	viv_harkare@rediffmail.com	9422105174	3348 4706 1877	No	
2	Dr. Nitin Vasant Deosthale	Professor	Otorhinolaryngology	Regular	M.B.B.S., M.S., DNB (ENT), MNAMS	Yes	30 Years	Yes	MUHS/PG/E-1/1503/27/2829/17 Dtd.22/12/2017	3	25-Jan-67	nvdeosthale@rediffmail.com	9822230010	4062 0571 8910	No	
3	Dr. Priti Rakesh Dhoke	Associate Professor	Otorhinolaryngology	Regular	M.B.B.S., M.S.(ENT)	Yes	17 Years 4 Mths	Yes	MUHS/PG/E-1/1503/27/2829/17 Dtd.22/12/2017	3	16-Jun-77	drprtidhoke@rediffmail.com	9326969839	4347 7788 1309	No	



**DEAN**  
**N.K.P. Salve Institute**  
**Of Med. Sciences & R**  
**and L.M.H. NAGPUR**







**PROFESSOR & HOD**  
 Department of Otorhinolaryngology  
 N.K.P. Salve Institute of Medical  
 Sciences & Research Centre and  
 Lata Mangeshkar Hospital, Nagpur

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**MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK**  
**SUBJECTWISE ELIGIBLE EXAMINERS LIST (PG Courses)**

the College : N.K.P. Salve Institute of Medical Sciences & Research Centre and Lata Mangeshkar Hospital, Nagpur  
 Mobile No. : 07104-665000  
 the Subject : Anaesthesiology

Sr. No.	Name of Teacher (Last Name First Name Middle Name)	Designation	Subject/ Speciality	Type of Appointment (Regular/ Temp. / Honorary)	Qualification	University Approx at (UG)	PG Teaching Experience (in Years) after PGM	PG Teacher Recognition Yes/No	(Recognition Letter Date issued by University)	No. of PG Students Guided last 5 year	Date of Birth	E-mail ID	Mobile No.	Aadhar Card No	If Debarred (Yes/ No)	Sign.. of Teacher
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17
1	Dr. Bhure Anjali Rakesh	Professor & Head	Anaesthesiology	Regular	MBBS, MD	MUHS/E-1/1503/2646/2005 Date: 27/07/2005	20 yrs 6 mnths	Yes	MUHS /E-1/PG/1503/3553/2006 Date:04/08/2006	13	4/10/1960	anjali_bhure@yahoo.co.in	9822563121	2070 4406 3093	No	
2	Dr. Bhargava Sumita Pramanik	Associate Professor	Anaesthesiology	Regular	MBBS, MD	MUHS UG/E-1/53/15031018 /2020 Date 09/06/2020	4 yrs 1 mnth	Yes	MUHS/PG/E-1/1503/1348/20 Date: 05/08/2020	6	5/1/1965	bhargavasumita@yahoo.in	7219105329 / 7709428071	2412 8932 2804	No	
3	Dr. Marodkar Ketaki Sushant	Associate Professor	Anaesthesiology	Regular	MBBS, MD	MUHS UG/E-1/53/15031018 /2020 Date 09/06/2020	2 yrs 10 mnths	Yes	MUHS/PG/E-1/1503163/2023 Date: 13/012023	4	01/071981	drketaki.dolkar@yahoo.co.in	9850967274	7513 0335 8214	No	
4	Dr. Pahuja Heena Dinesh	Associate Professor	Anaesthesiology	Regular	MBBS, MD	MUHS UG/E-1/53/15031018 /2020 Date 09/06/2020	2 yrs 10 mnths	Yes	MUHS/PG/E-1/1503163/2023 Date: 13/012023	4	10/5/1975	heenapahuja15@yahoo.com	9823188160	8705 6346 3201	No	
5	Dr. Ghate Tilka Vivek	Associate Professor	Anaesthesiology	Regular	MBBS, MD	MUHS/UG/E-1/1503/1989/20 Date:28/10/2020	1 mnth	Yes	MUHS/PG/E-1/1503163/2023 Date: 13/012023	1	21/08/1981	tilkavghate@gmail.com	8446095872	5853 2097 5651	No	



DEAN  
 N.K.P. Salve Institute  
 Of Med. Sciences & R  
 and L.M.H. NAGPUR

**DR. ANJALI R. BHURE**  
 PROFESSOR & HOD


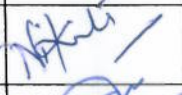
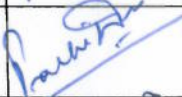
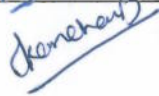
Department of Anesthesiology  
 N.K.P. Salve Institute of Medical  
 Sciences & Research Centre and

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**MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, SHIK**  
**SUBJECTWISE ELIGIBLE EXAMINERS LIST (PG Courses)**


Name of the College : N.K.P. Salve Institute of Medical Sciences & Research Centre and Lata Mangeshkar Hospital, Nagpur  
 Phone/Mobile No. : 07104-665000  
 Name of the Subject :

Sr. No.	Name of Teacher (Last Name First Name Middle Name)	Designation	Subject/ Speciality	Type of Appointment (Regular/ Temp. / Honorary)	Qualification	University Approval (UG)	PG Teaching Experience (in Years) after PGM	PG Teacher Recognition Yes/No	(Recognition Letter Date issued by University)	No. of PG Students Guided last 5 year	Date of Birth	E-mail ID	Mobile No.	Aadhar Card No	If Debarred (Yes/ No)	Sign. of Teacher
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17
1	Dr. Anuja Vivek Bhalerao	Prof. & HOD	OBGY	Regular	MD	Yes	33 Yrs 3Mo	Yes	MUHS/E-1/PG/1503/5961/2006	11	08-03-1966	anuja_bhalerao@yahoo.com	9823680572	7762 9405 1176	No	
2	Dr. Varsha Dharmendra Kose	Asso.Prof.	OBGY	Regular	MD	Yes	16 Yrs 10 Mo	Yes	MUHS/E1/PG/1503/2462/201122/10/2011	9	10-03-1967	varshadkose@rediffmail.com	9372304330	8653 1695 6399	No	
3	Dr. Savita Ashutosh Somalwar	Asso.Prof.	OBGY	Regular	DNB	Yes	26 Yrs. 10 Mo	Yes	MUHS/E1/PG/1503/1722/201326/6/2013	8	16-03-1968	somalwar.som@gmail.com	9158920941	4859 5385 5081	No	
4	Dr. Nikita Ritesh Vijay	Asso.Prof.	OBGY	Regular	MS	Yes	11 Yrs 6 Mo	Yes	MUHS/E1/PG/1503/4113/201820/11/2018	4	24-09-1978	nikitarvijay@gmail.com	9421778075	3899 2143 1137	No	
5	Dr Prachi Divish Saxena (Dixit)	Asso.Prof.	OBGY	Regular	MS	Yes	11 Yrs	Yes	MUHS/PG/E-1/1503/5661/2019	4	10-04-1981	drprachidivish@yahoo.com	9923009576	5589 6751 0396	No	
6	Dr. Kanchan Samir Dwidmuthe	Asst. Prof.	OBGY	Regular	DNB	Yes	9 yrs 5 Months	Yes	MUHS/PG/E-1/1503/645/2021 Dt. 5/3/2021	2	29-11-1979	kanchandwidmuthe@gmail.com	8237659529	8219 9213 2894	No	

  
10.2.23

**PROFESSOR & HOD**  
 Department of Obstetrics & Gynecology  
 N.K.P. Salve Institute of Medical  
 Science & Research Centre and  
 Lata Mangeshkar Hospital, Nagpur





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**MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK**  
**SUBJECTWISE ELIGIBLE EXAMINERS LIST (PG Courses)**

Name of the College : N.K.P. Salve Institute of Medical Sciences & Research Centre and Lata Mangeshkar Hospital, Nagpur  
 Phone/Mobile No. : 07104-665000  
 Name of the Subject : **Radiodiagnosis**

Sr. No.	Name of Teacher (Last Name First Name Middle Name)	Designation	Subject/ Speciality	Type of Appointment (Regular/ Temp. / Honorary)	Qualification	University Approx at (UG)	PG Teaching Experience (in Years) after PGM	PG Teacher Recognition Yes/No	(Recognition Letter Date issued by University)	No. of PG Students Guided last 5 year	Date of Birth	E-mail ID	Mobile No.	Aadhar Card No	If Debarred (Yes/ No)	Sign.. of Teacher
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17
1	Dr.Dhok Avinash Parshuram	Professor & HOD	Radiodiagnosis	Regular	MD	Yes	20 Yrs, 8 Mths	Yes	MUHS/PG/E-1/1503/27/525 5/22 dt. 28/11/2022	9	13/07/1970 52 Yrs	avinashdhok1@gmail.com	9822230722	666368 956930	No	
2	Dr.Mitra Kajal Ramendranath	Professor & DEAN	Radiodiagnosis	Regular	MD	Yes	33 Yrs 7 Mths	Yes	No.MUHS/E-1/PG/1503/22 66/2011 Dt. 8/10/2011	14	23/12/1961 61 Yrs	mitrakajal18@gmail.com	9371615705	485381 169663	No	
3	Dr.Kadam Dipali Satish	Professor	Radiodiagnosis	Regular	MD	Yes	29 Yrs 4 Mths	Yes	No.MUHS/E-1/PG/1503/22 66/2011 Dt. 8/10/2011	8	14/10/1964 58 Yrs	drkadam123@rediffmail.com	9422802828	9152437 90826	No	
4	Dr.Phatak Suresh Vasant	Professor	Radiodiagnosis	Regular	MD	Yes	16 Yrs 6 Mths	Yes	MUHS/PG/E-1/1503/27/525 5/22 dt. 28/11/2022	1	19/09/1960 62 Yrs	suresh-phatak@yahoo.com	9960571260	787842 736796	No	
5	Dr. Onkar Prashant Madhukarrao	Professor	Radiodiagnosis	Regular	MD	Yes	23 Yrs 9 Mths	Yes	MUHS/PG/E-1/1503/27/525 5/22 dt. 28/11/2022	10	23/10/1970 52 Yrs	drprashant onkar@gmail.com	9822233570	72086 9392066	No	

Sign Seal by HOD

**DR. AVINASH DHOK**  
 PROFESSOR & HOD  
 Department of Radiodiagnosis  
 N.K.P. Salve Institute of Medical  
 Sciences & Research Centre and  
 Lata Mangeshkar Hospital, Nagpur

Sign Seal by Dean

**DEAN**  
 N.K.P. Salve Institute  
 Of Med. Sciences & RC  
 and LMH, NAGPUR